Complete and send this form, together

applicable fee(s),

FEE Mail Stop IS Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



(571) 273-2885 or Fax

innronriate All further cor	respondence including the loclow or directed otherwise	Patent, advance on	ders and noti	ification of i	naintenance fees	will be mailed to the current s; and/or (b) indicating a sepa	correspondence address as
CURRENT CORRESPONDENC	E	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
SUGHRUE MIO 2100 Pennsylvania Washington, DC 20 10/27/2005 MBEYENE2 00	2005	I he Sta add trar	creby certify that the Postal Service ressed to the Massmitted to the US	ertificate of Mailing or Trans this Fee(s) Transmittal is bein with sufficient postage for fin all Stop ISSUE FEE address PTO (571) 273-2885, on the o	smission g deposited with the United st class mail in an envelope above, or being facsimile date indicated below.		
	MANUSET !				(Depositor's name)		
01 FC:1501 1400.00 OP 200.00 OP 300.00 OP				L			(Signature)
1012001							(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INVEN				ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/734,623	12/15/2003		David R	. Shafer		Q79028	2006
TITLE OF INVENTION: C.	ATADIOPTRIC PROJECTI	ON OBJECTIVE	WITH GEON	METRIC BE.	AM SPLITTING		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLI	CATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400			\$300	\$1700	10/27/2005
EXAMINER ART			NIT CLASS-SUBCLASS				
CHOI, WILLIAM C 28				359-727000			
2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Oberkochen, GERMANY							
Please check the appropriate	assignee category or catego	ries (will not be pri	inted on the p	oatent):	Individual 🛂	Corporation or other private gr	oup entity Government
A. The following fee(s) are enclosed: Let a the following fee(s) are enclosed: Let a the following fee(s) are enclosed: A check is attached for the NOA Fees payment. Please charge any payment deficiency and credit overpayment to PODA 19-4880. A duplicate copy of this form is attached. It copy of this form.							
a. Applicant claims S	MALL ENTITY status. See	37 CFR 1.27.			<u> </u>	ALL ENTITY status. See 37 C sly paid issue fee to the applic gistered attorney or agent; or t	
Authorized Signature Up F U Date 10/26/05							

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Registration No. 36, 359

Typed or printed name

George F. Lehnigk